

EV 517 993 216 US **PATENT**

NITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Marcy Lynn Daniel et al.

Serial No.

10/717,231

Filing Date

November 19, 2003

Title

Socks Having Match Indicators

Examiner

Alissa L. Hoey

Group Art Unit

3765

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

REQUEST FOR EXTENSION OF TIME PURSUANT TO 37 CFR 1.136(a)

Dear Sir:

Applicant respectfully requests a two month extension of time in which to respond to the Official Action mailed September 29, 2005, in the above-identified application. This extension of time will extend the period for filing to expire on February 28, 2006.

Enclosed is a credit card form authorizing a charge of \$450.00 for the fee for a two month extension of time. The Commissioner is also hereby authorized to charge any additional fees required by this action, or credit any overpayment, to Deposit Account No. 16-1435. A duplicate of this sheet is enclosed for that purpose.

The Office is respectfully invited to contact J. Michael Boggs at (336) 747-7536, to discuss any matter relating to this application.

Respectfully submitted,

JI Michael Boggs

Reg. No. 46,563

Kilpatrick Stockton LLP 1001 West Fourth Street Winston-Salem, NC 27101 (336) 747-7536 (336) 734-2632 (facsimile) 41872-287263 9167623.1

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450.00 OP

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Effective on 12/08/2004 Complete if Known Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/717,231 Application Number FEE TRANSMITTAL November 19, 2003 Filing Date for FY 2005 Marcy Lynn Daniel et al. First Named Inventor icant claims small entity status. See 37 CFR 1.27 **Examiner Name** Alissa L. Hoey Art Unit 3765 TAL AMOUNT OF PAYMENT (\$) 450.00 41872-287263 Attorney Docket No.

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METHOD OF PAYMENT (check all that apply)											
☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify) :											
☐ Deposit Account Deposit Account Number: 16-1435 Deposit Account Name: Kilpatrick Stockton LLP											
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee											
Charge a	☐ Charge any additional fee(s) or underpayments of fee(s) ☐ Credit any overpayments										
Under 37	Under 37 CFR 1.16 and 1.17										
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.											
FEE CALCULATION											
1. BASIC FILING, SE	•										
	FILING FEES <u>Small</u> Entity		SEARCH	SEARCH FEES Small Entity		EXAMINATION FEES Small Entity					
Application Type	Fee (\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fee(\$)	Fees Paid (\$)				
Utility	300	150	500	250	200	100					
Design	200	100	100	50	130	65					
Plant	200	100	300	150	160	80					
Reissue	300	150	500	250	600	300	<u></u>				
Provisional	200	100	0	0	0	0					
2. EXCESS CLAIM FE	EES						Small Entity				
Fee Description						<u>Fee (\$)</u>	<u>Fee (\$)</u>				
Each claim over 20 (including Reissues) 50 Each independent claim over 3 (including Reissues) 200						25 100					
Multiple dependent claims 360						360	180				
<u>Total Claims</u>	Extra C	<u> Fee(</u> \$	<u>Fe</u>	e Paid (\$)		<u>Multiple</u>	Dependent Claims				
20 or HP		_ ×	· - —			<u>Fee (\$)</u>	Fee Paid (\$)				
HP = highest number of	•			- Data (A)							
Indep. Claims - 3 or HP	<u>Extra C</u> -	<u>Fee(</u> \$ x	<u> </u>	e Paid (\$)							
HP = highest number of											
3. APPLICATION SIZE	FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer											
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).											
Total Sheets	Fee Paid (\$)										
100	=										
4. OTHER FEE(S)	Fees Paid (\$)										
Non-English Sp											
Other (e.g., late	450.00										

(SUBMITTED BY				
	Signature	a. Michael Boggs	Registration No. (Attorney/Agent) 46,563	Telephone	(336) 747-7536
	Name (Print/Type)	J. Michael Boggs		Date 2	128/06